Docket No.: PF-0421-2 DIV

Certificate of Mailing

I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail in an envelope addressed to Box. Non-Fee Amendment, Commissioner for Patents, Washington, D.C. 20231 on December 17, 2002.

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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

DEC 3 1 2002

In re Application of:

Hillman et al.

TECH CENTER 1600/2900

Title:

PROTEINS ASSOCIATED WITH CELL PROLIFERATION

Serial No.:

09/894,657

Filing Date:

June 28, 2001

Examiner:

Harris, A.

Group Art Unit:

1642

Box Non-Fee Amendment Commissioner for Patents Washington, D.C. 20231

FEE TRANSMITTAL SHEET

Sir:

Transmitted herewith are the following for the above-identified application:

- 1. Return Receipt Postcard;
- 2. Response to Restriction Requirement (13 pp.); and
- 3. Certificate of Revocation of Power of Attorney and Appointment of New Attorneys (2 pp.).

The fee has been calculated as shown below.

| Claims | Claims Affer Amendment | | Claims Previously Paid For | 1 | Present Extra | Other T Small E Rate | | | Additional Fee(s) |
|---|---------------------------|---|----------------------------------|----------|------------------|----------------------------|------------|---|----------------------|
| Total | 20 | - | 20 | | 0 | x\$18.00 | 0 | s | 0 |
| Indept. | 3 | - | 3 | | 0 | x\$84.00 | 0 | s | 0 |
| First Presentation of Multiple Dependent Claims + | | | | | +280.00 | 0 | \$ | 0 | |
| | | | | | | | Total Fee: | s | 0. |

| <u>X</u> | No additional Fee is required. | |
|----------|---|----|
| | Please charge Deposit Account No. 09-0108 in the amount of: | \$ |

The Commissioner is hereby authorized to charge any additional fees required under 37 CFR 1.16 and 1.17, or credit overpayment to Deposit Account No. 09-0108. A duplicate copy of this sheet is enclosed.

Respectfully submitted,

INCYTE GENOMICS, INC.

Date: <u>12/17/02</u>

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